## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

10629902

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
T	OTAL CLAIMS		(Column 1)		(Colu	olumn 2)		TYPE		OR	SMALL	ENTITY
TOTAL CLAIMS			7					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			7 minus 20= '		· 0			X\$ 9=		OR	X\$18=	/
INDEPENDENT CLAIMS			/ minus 3 = *		*	O		X43=		OR	X86=	
M	JLTIPLE DEPEI	NDENT CLAIM P	RESENT					+145=		OR	+290=	
* 11	the difference	in column 1 is	less than zero, enter "0" in colum			column 2	L	TOTAL		OR	TOTAL	770
CLAIMS AS AMENDED - PART II											OTHER	
10	7770 (	(Column 1)	(Column 2)			(Column 3)	•	SMALL	ENTITY	OR	SMALL	
AMENDMENT A	· · · · · · · · · · · · · · · · · · ·	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	. 1	Minus	**	90	=		X\$ 9=		OR	X\$18=	
AME	Independent	· 2	Minus			<u> </u>		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
								TOTAL		OR	TOTAL ADDIT, FEE	
		A	DDIT. FEE			ADDII. FEE I						
AMENDMENT B		(Column 1) CLAIMS		(Colum	EST	(Column 3)	1 г		ADDI-			ADDI-
		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=	$\prod$	X\$ 9=		QR	X\$18=	•
	Independent	*	Minus	***		=		X43=		00	X86=	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	7.00	
	`									OR	+290=	•
	4.0							TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
Z ŀ		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIOI PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	** \		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	*** 5		=		X43=		. 1	X86=	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							743-		OR	700-	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=	
** If	the "Highest Nun	nber Previously Pai	d For IN THIS	SPACE is	less than	20, enter "20."	. AD	TOTAL DIT. FEE		OR ,	TOTAL ODIT. FEE	
T	the "Highest Nun he "Highest Numl	nber Previously Pai ber Previously Paid	d For" IN THIS For" (Total or	S SPACE is Independer	less than nt) is the	n 3, enter "3." highest number			ropriate box			